Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at http://about.jstor.org/participate-jstor/individuals/early-journal-content.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

American physicians as possible, interested in the work of the congress, may be present:

SEPTEMBER 10, 1912.

The honorable the SECRETARY OF THE TREASURY.

SIR: I have the honor to inclose, with the request that your department give the matter due publicity, a translation of a note from the French Embassy, in which, at the instance of Dr. Hutinel, member of the Academy of Medicine of Paris, it urges that American physicians interested in the matter be advised of the desire of the International Association for the Study of Infantile Hygiene and Pathology that they attend the next congress of the association to be held at Paris.

Translations of the note have also been sent to the War, Navy, and Interior Departments, respectively.

I have the honor to be, sir, your obedient servant,

HUNTINGTON WILSON,
Acting Secretary of State.

EMBASSY OF THE FRENCH REPUBLIC TO THE UNITED STATES,
Washington, August 29, 1912.

Mr. SECRETARY OF STATE:

I have just received telegraphic notice from my Government that the foreign physicians belonging to the International Association for the Study of Infantile Hygiene and Pathology have made the offer to their French colleagues to hold at Paris the next Congress of Pediatrics.

I have also received instructions to inform your excellency of the desire expressed by Dr. Hutinel, member of the Academy of Paris, that the physicians in foreign countries who are most eminent in the treatment of children's diseases, especially those physicians who belong to pediatric societies already constituted in the several countries, be invited to attend this international meeting, which will be held on October 7. Dr. Hutinel desires that the said physicians be temporarily excused from their lecture courses to enable them to attend the congress, which, like the International Association of Pediatrics, has the moral support of the French Government, its honorary president being the minister of public instruction of the Republic.

I venture to have recourse to your excellency's good offices to have this invitation made known as soon as possible to the American physicians concerned, whose attendance at the congress is greatly desired by my fellow countrymen.

Be pleased, Mr. Secretary, to accept the assurance of my high consideration.

E. DE PERETTI DE LA ROCCA.

His Excellency Hon. P. C. KNOX,
Secretary of State of the United States.

SMALLPOX IN THE UNITED STATES.

PREVALENCE AND GEOGRAPHIC DISTRIBUTION DURING THE CALENDAR YEAR 1911.

By JOHN W. TRASK, Assistant Surgeon General, United States Public Health Service

Smallpox was still prevalent throughout the United States during the year 1911. The general type of the disease was the same as that which has been common for the last 14 or 15 years. Most of the cases were mild, so mild in fact that frequently it was difficult to make a diagnosis. Many cases were undoubtedly pronounced chickenpox. Some of those attacked suffered so little inconvenience that a physician was not called in attendance, and in some cases the patients had not discontinued their regular occupations. Others had taken a cessation from work for a day or two.

This mild type of the disease is not one peculiar to this country. During recent years there has been a similarly benign form in certain sections of Brazil, and for many years a disease, undoubtedly a mild form of smallpox, has occurred in certian localities in Africa where it has been known by various names, among which are "amaas," "Kaffir smallpox." and "kaffir-pox." A type apparently identical with that common in this country is also prevalent in Canada, and outbreaks of the same nature have at times been reported in the West Indies. It has been stated that similarly mild, benign outbreaks were noted previous to the nineteenth century. The reason why the disease assumes this mild form at times and continues so for a considerable period, often involving extensive territory, is not understood.

In the United States there have been during the year only a few outbreaks of the severe type of the disease. These were limited to Texas, California, and Kansas. The occurrence of malignant smallpox always arouses an acute interest on the part of both the public and the local officials, with the result usually that strenuous efforts are made to control the disease, and this end is invariably accomplished by means of general vaccination.

During the calendar year 1911 reports were received by the Surgeon General of the United States Public Health Service from the health authorities of 29 States and the District of Columbia, giving the occurrence of smallpox as notified in their respective jurisdictions. In these States there was a total of 21,768 cases and 134 deaths reported. During the year 1910 there were notified in these same States 25,598 cases with 403 deaths, and in 1909, 20,679 cases with 132 deaths.

From such information as was obtainable the disease during 1911 appears to have been equally prevalent, if not more so, in the States from which no reports were received. The fact that certain States did not report on the prevalence of the disease was not due to an absence of cases of smallpox within their territory, but to an absence of laws requiring the notification of cases, or in the presence of such laws, to a failure to enforce them.

It must not, therefore, be understood that the States enumerated in the tables which follow later had more smallpox than the States that do not appear. In fact, many of the States that are not mentioned because of a lack of the necessary reports are known to have been heavily infected with the disease. The States included in the tables are those having the better laws and more effective health departments. They are the States having health departments that keep informed with some degree of accuracy regarding the prevalence of disease within their respective jurisdictions.

PREVALENCE.

Cases of smallpox occurred at some time during the year in all of the States reporting. The greatest numbers of cases were notified in North Carolina, Florida, Kansas, Utah, and Colorado, with 2,484, 2,195, 2,043, 1,660, and 1,381 cases, respectively, in the order named.

Although the number of cases reported in North Carolina was greater than that in any other State, there was a marked decrease from the preceding year when 4,281 cases were reported. In Florida only 3 cases were reported in 1909. In 1910 the number was 1,286, and in 1911, 2,195 cases. In Kansas the annual number of cases was practically the same during the three years 1909, 1910, and 1911. The

1,660 cases reported in Utah was an increase over the 966 cases reported in 1910, and a decrease from the 1,854 cases for 1909.

A decrease in the prevalence of the disease is noted in Michigan, there having been in 1911 only 691 reported cases, whereas in 1910 there were 2,585. Oklahoma also showed a decrease, there being only 1,080 cases in 1911, against 2,342 during the preceding year. In Texas the number decreased from 2,925 reported cases in 1910 to 687 in 1911.

The States with the smallest number of cases were Connecticut, Massachusetts, District of Columbia, Maryland (exclusive of Baltimore), New Jersey and Maine, with 2, 11, 28, 31, 40, and 68 cases, respectively.

CASE RATE.

The case rate, based upon the population, gives a much better idea of the relative prevalence of the disease. Using the estimated midyear populations, the highest case rates were in Utah, Florida, Colorado, Kansas, and North Carolina, these States in the order named having the following case rates per thousand inhabitants: 4.31, 2.81, 1.66, 1.19, and 1.10. The lowest case rates per thousand population were those of Connecticut, Massachusetts, New Jersey, Pennsylvania, and New York, with rates of .002, .003, .015, .02, and .036, respectively.

Utah also had the highest case rates in 1909 and 1910, with rates of 5.07 in the former year and 2.57 in the latter.

CASE FATALITY.

On the whole, the case fatality rate was very low. Among the 21,767 cases only 134 deaths were reported. This makes the exceedingly low aggregate fatality rate of 0.61 for each 100 cases.

The greatest number of deaths occurred in Texas, Kansas, California, Utah, and Florida, with 51, 26, 10, 8, and 6 deaths, respectively, in the order named. No deaths were reported in Connecticut, District of Columbia, Maine, Maryland (exclusive of Baltimore), North Carolina, North Dakota, Vermont, Virginia, and Wisconsin. The 11 cases with 2 deaths in Massachusetts gave a fatality rate per hundred cases of 18.18. This was higher than that of any other State. Texas with 687 cases and 51 deaths had a fatality rate of 7.42 per hundred cases; California had a rate of 5.4; New Jersey of 2.5; Kansas and Pennsylvania each a rate of 1.27.

VIRULENT OUTBREAKS.

During the year the disease appeared in virulent form in El Paso and Guadalupe Counties, Tex. In El Paso County there were 25 deaths among 97 cases. Many of the cases were confluent and some hemorrhagic. In Guadalupe County there were 2 deaths in 5 cases.

In Kansas a severe outbreak occurred in Topeka. This outbreak began in May and continued into October. There were in all 143 cases with 23 deaths. Many of the cases were hemorrhagic.

In Osage County, Kans., 3 deaths from smallpox also occurred.

The malignant type of the disease appeared in Los Angeles, Cal., in November, 1911. The first case was in a district occupied by Mexicans. The mild form of the disease had been present in the city from

March to the end of October. The cases were few, however, and during these months there were in all only 26 reported. These were all of the benign type of the disease so prevalent throughout the United States, and among them there was no fatality. During the last two months of the year, however, the disease appeared in virulent form, and out of 25 cases reported during these months 6 ended fatally.

The virulent outbreaks during the year 1911 were less numerous than those of the preceding year. The only two outbreaks of any extent were those in Topeka, Kans., and El Paso, Tex. These are comparable with the outbreaks which occurred during the preceding year in Bay City, Saginaw, and Lapeer, Mich. The fact that there were 2 deaths among the 11 cases in Massachusetts would indicate that at least some of the cases occurring in that State were of the virulent type. The infection, however, appears to have been kept under control, and not to have spread.

TABLE No. 1.—*Showing, by months, the number of cases of smallpox reported in certain States during the calendar year 1911.*

States.	January.		February.		March.		April.		May.		June.		July.		August.		September.		October.		November.		December.		Total.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
California	21	1	10	1	21	....	19	....	8	....	3	2	5	....	17	....	19	....	11	....	15	3	36	3	185	10
Colorado	275	1	176	....	306	....	281	....	139	....	80	....	26	....	25	....	16	....	19	....	15	....	23	....	1,381	1
Connecticut	....	....	....	....	....	....	....	....	....	....	....	....	1	....	1	....	....	....	....	....	....	....	....	....	2	....
District of Columbia	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	[1]28	....
Florida	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	[1]2,195	[1]6
Illinois	48	....	48	....	68	....	172	....	337	....	106	....	26	....	30	....	55	....	79	....	54	....	60	....	1,083	[2]4
Indiana	155	....	99	....	117	2	162	....	208	....	90	1	36	....	31	....	21	....	13	....	37	....	113	....	1,082	3
Iowa	55	1	66	....	88	1	124	....	147	1	91	1	34	....	12	....	27	....	23	....	56	....	45	....	768	4
Kansas	160	....	279	1	430	2	244	....	221	3	99	1	74	10	48	6	25	....	48	1	210	2	205	....	2,043	26
Maine	....	....	....	....	....	....	2	....	4	....	3	....	....	....	3	....	....	....	....	....	....	....	56	....	68	....
Maryland (exclusive of Baltimore city)	8	....	4	....	....	....	5	....	9	....	3	....	2	....	....	....	....	....	....	....	....	....	....	....	31	....
Massachusetts	....	....	....	....	....	....	1	....	4	....	1	....	....	....	....	....	1	....	....	....	2	....	2	2	11	2
Michigan	125	2	136	....	99	....	52	....	95	....	38	....	29	....	22	....	9	....	4	....	13	....	69	....	691	2
Minnesota	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	[1]1,164	[1]3
Montana	37	1	48	....	59	....	32	....	32	....	....	....	16	....	11	....	18	....	6	....	16	1	30	....	305	2
New Jersey	26	....	2	....	4	....	2	....	3	....	....	....	1	....	....	....	1	1	....	....	....	....	1	....	40	1
New York	7	....	5	....	6	....	5	....	34	....	33	....	25	....	14	....	9	....	9	1	24	....	166	2	337	3
North Carolina	933	....	399	....	303	....	278	....	69	....	82	....	39	....	55	....	59	....	90	....	79	....	98	....	2,484	....
North Dakota	37	....	26	....	7	....	....	....	8	....	11	....	6	....	6	....	16	....	....	....	7	....	33	....	157	....
Ohio	61	....	13	1	49	....	120	....	88	....	75	....	35	....	13	....	....	....	....	....	91	....	45	....	590	1
Oklahoma	234	....	205	1	180	....	219	....	149	....	50	....	....	....	17	....	....	....	3	....	6	....	17	....	1,080	1
Oregon	5	....	1	....	2	....	8	....	10	....	7	....	8	....	11	....	19	....	10	....	33	....	92	1	206	1
Pennsylvania	15	....	5	....	8	....	13	....	37	1	42	....	7	....	3	....	....	....	....	....	7	....	20	1	157	2
South Dakota	77	....	109	....	84	....	96	1	62	....	50	....	17	....	5	....	9	....	4	....	47	....	10	....	570	1
Texas	117	5	76	....	119	....	134	1	128	....	22	....	14	1	16	....	5	6	....	....	12	24	44	14	687	51
Utah	160	....	151	....	161	1	260	2	154	2	193	....	10	1	62	1	53	....	....	....	242	1	214	....	1,660	8
Vermont	....	....	....	....	....	....	....	....	....	....	....	....	15	....	....	....	40	....	50	....	139	....	79	....	323	....
Virginia	292	....	81	....	115	....	101	....	138	....	33	....	17	....	....	....	13	....	33	....	19	....	68	....	910	....
Washington	87	....	123	....	110	2	138	....	142	....	51	....	70	....	43	....	20	....	50	....	57	....	88	....	979	2
Wisconsin	43	....	53	....	52	....	43	....	70	....	18	....	....	....	21	....	19	....	32	....	113	....	86	....	550	....
Total	2,978	11	2,115	4	2,388	8	2,511	4	2,296	11	1,181	5	498	12	466	7	414	7	434	2	1,155	31	1,621	37	21,767	134

---

[1] Reported by weeks.

[2] The 4 deaths occurred during the first 5 months.

TABLE No. 2.—*Showing the number of cases of and deaths due to smallpox reported in certain States during the calendar years 1909, 1910, and 1911.*

States.	1909		1910		1911	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
California	180	6	177	1	185	10
Colorado	345		1,096	7	1,381	1
Connecticut	3				2	
District of Columbia	24		96		28	
Florida	3	1	1,286	12	2,195	6
Illinois	2,135	8	730	(?)	1,083	4
Indiana	1,363	5	764	1	1,082	3
Iowa	825	4	850	1	768	4
Kansas	2,197	4	2,202	12	2,043	26
Maine	36		8		68	
Maryland (exclusive of Baltimore City)	26		6		31	
Massachusetts	14	1	144		11	2
Michigan	1,175	4	2,585	121	691	2
Minnesota	1,430	14	1,002	10	1,164	3
Montana	685	3	634	2	305	2
New Jersey	88	2	22		40	1
New York	762	4	353	8	337	3
North Carolina	1,733	2	4,281	8	2,484	
North Dakota	204		306	2	157	
Ohio	1,328	4	750	13	590	1
Oklahoma	1,434	6	2,342	99	1,080	1
Oregon	252		164	5	206	1
Pennsylvania	25		168	8	157	2
South Dakota	13	2	365	1	570	1
Texas	752	14	2,925	67	687	51
Utah	1,854	5	966	2	1,660	8
Vermont	73				323	
Virginia	202	18	350	6	910	
Washington	310	9	583	14	979	2
Wisconsin	1,208	16	443	3	550	
Total	20,679	132	25,598	403	21,767	134

TABLE No. 3.—*Showing the smallpox case rate per 1,000 inhabitants and fatality rate per 100 cases in certain States during the calendar years 1909, 1910, and 1911.*

States.	1909		1910		1911	
	Case rate per 1,000 inhabitants.	Case fatality rate per 100.	Case rate per 1,000 inhabitants.	Case fatality rate per 100.	Case rate per 1,000 inhabitants.	Case fatality rate per 100.
California					0.074	5.40
Colorado	0.443		1.362	0.64	1.662	.07
Connecticut	.003				.002	
District of Columbia	.073		.289		.083	
Florida	.004	33.33	1.696	.93	2.814	.27
Illinois	.383	.37	.129		.189	.37
Indiana	.507	.37	.282	.13	.397	.27
Iowa	.371	.48	.382	.12	.345	.52
Kansas	1.317	.18	1.298	.54	1.190	1.27
Maine	.049		.011		.091	
Maryland (exclusive of Baltimore City)	.036		.008		.041	
Massachusetts	.004	7.14	.043		.003	18.18
Michigan	.424	.34	.917	4.68	.242	.28
Minnesota	.694	.98	.482	.99	.550	.25
Montana	1.875	.44	1.673	.31	.778	.65
New Jersey	.036	2.27	.009		.015	2.50
New York	.085	.52	.039	2.26	.036	.89
North Carolina	.795	.12	1.934	.18	1.109	
North Dakota	.367		.525	.65	.258	
Ohio	.281	.30	.159	1.73	.122	.17
Oklahoma	.904	.42	1.398	4.22	.613	.09
Oregon	.387		.242	3.05	.293	.48
Pennsylvania	.003		.022	4.76	.020	1.27
South Dakota					.941	.19
Texas			.747	2.29	.172	7.42
Utah	5.071	.27	2.573	.21	4.312	.48
Vermont	.206				.905	
Virginia					.436	
Washington	.284	2.90	.505	2.40	.803	.20
Wisconsin	.521	1.32	.189	.67	.232	